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MICHAEL W. DOBBINS
CLERK, U.S. DISTRICT COURTUNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF ILLINOIS
EASTERN DIVISIONWENDELL THOMPSONANDRE JACKSON ON BEHALFOF KANE CO. DETAINES(Enter above the full name
of the plaintiff or plaintiffs in
this action)

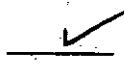
07CV 7198

JUDGE HOLDERMAN

MAGISTRATE JUDGE MASON

vs.

Civ.

(To be supplied by the Clerk of this Court)KANE COUNTY HEALTH DEPT. (CLAIR DOBBINS)PATRICK PEREZL.T. WAYNE CARTERC/O McDONOUGH(Enter above the full name of ALL
defendants in this action. Do not
use "et al.")**CHECK ONE ONLY:****COMPLAINT UNDER THE CIVIL RIGHTS ACT, TITLE 42 SECTION 1983**
U.S. Code (state, county, or municipal defendants)**COMPLAINT UNDER THE CONSTITUTION ("BIVENS" ACTION), TITLE**
28 SECTION 1331 U.S. Code (federal defendants)**OTHER (cite statute, if known)****BEFORE FILLING OUT THIS COMPLAINT, PLEASE REFER TO "INSTRUCTIONS FOR
FILING." FOLLOW THESE INSTRUCTIONS CAREFULLY.**

I. Plaintiff(s):

A. Name: WENDELL THOMPSON, ANDRE JACKSON

B. Date of Birth: 9-24-66, 7-31-67

C. List all aliases: NONE, DONALD COPELAND AND LAWERENCE MAXWELL

D. Prisoner identification number: #30421, 74546

E. Place of present confinement: KANE COUNTY JAIL

F. Address: 777 E. FABYAN PKWY. GENEVA, IL 60134

(If there is more than one plaintiff, then each plaintiff must list his or her name, date of birth, aliases, I.D. number, place of confinement, and current address according to the above format on a separate sheet of paper.)

II. Defendant(s):

(In A below, place the full name of the first defendant in the first blank, his or her official position in the second blank, and his or her place of employment in the third blank. Space for two additional defendants is provided in B and C.)

A. Defendant: KANE COUNTY HEALTH DEPT. (CLAIR DOBBINS)
Title: DIRECTOR HEALTH PROTECTION
Place of Employment: KANE COUNTY HEALTH DEPT. (AURORA)

B. Defendant: PATRICK PEREZ
Title: SHERIFF
Place of Employment: KANE COUNTY JAIL

C. Defendant: WAYNE CARTER
Title: LT.
Place of Employment: KANE COUNTY JAIL

(If you have more than three defendants, then all additional defendants must be listed according to the above format on a separate sheet of paper.)

DEFENDANT: C/O McDONOUGH

TITLE: CORRECTIONAL OFFICER

PLACE OF EMPLOYMENT: KANE COUNTY JAIL

III. List ALL lawsuits you (and your co-plaintiffs, if any) have filed in any state or federal court in the United States:

A. Name of case and docket number: WENDELL THOMPSON V. DIRECTOR BODACK AND MEDICAL STAFF, WENDELL C. THOMPSON VS. MIDLAND MANAGEMENT CO. et al. 07C5222

B. Approximate date of filing lawsuit: MAR. 1998, SEPT. 2007

C. List all plaintiffs (if you had co-plaintiffs), including any aliases: WENDELL C. THOMPSON

D. List all defendants: DIRECTOR BODACK AND MEDICAL STAFF, MIDLAND MANAGEMENT CO., KIM MORRIS

E. Court in which the lawsuit was filed (if federal court, name the district; if state court, name the county): NORTHERN DISTRICT

F. Name of judge to whom case was assigned: NOT KNOWN, JUDGE NILAN

G. Basic claim made: HEALTH AND LIFE ENDANGERMENT, ILLEGAL EVICTION

H. Disposition of this case (for example: Was the case dismissed? Was it appealed? Is it still pending?): DISMISSED

I. Approximate date of disposition: 1-11-99, OCT. 2007

IF YOU HAVE FILED MORE THAN ONE LAWSUIT, THEN YOU MUST DESCRIBE THE ADDITIONAL LAWSUITS ON ANOTHER PIECE OF PAPER, USING THIS SAME FORMAT. REGARDLESS OF HOW MANY CASES YOU HAVE PREVIOUSLY FILED, YOU WILL NOT BE EXCUSED FROM FILLING OUT THIS SECTION COMPLETELY, AND FAILURE TO DO SO MAY RESULT IN DISMISSAL OF YOUR CASE. CO-PLAINTIFFS MUST ALSO LIST ALL CASES THEY HAVE FILED.

IV. Statement of Claim:

State here as briefly as possible the facts of your case. Describe how each defendant is involved, including names, dates, and places. **Do not give any legal arguments or cite any cases or statutes.** If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. (Use as much space as you need. Attach extra sheets if necessary.)

THERE IS MOLD INFESTATION THROUGHOUT THE KANE COUNTY JAIL, AS A RESULT OF IMPROPER MAINTENANCE OF THE FACILITY, AS WELL AS NEGLECTING ADMINISTRATIVE OBLIGATIONS TO CORRECT THE UNCONSTITUTIONAL LIFE THREATENING ENVIRONMENTAL HAZARD AND THE KANE COUNTY HEALTH DEPT. FAILING TO PROPERLY INSPECT AND/OR REPORT NEGLIGENCE TO PROPER AUTHORITIES. DISREGARDING PROTECTION OF DETAINES AGAINST ANY UNREASONABLE AND SIGNIFICANT RISK OF HARM, WHICH MAY POSSIBLY RESULT IN DEATH. DETAINEE INFORMED KANE CO. HEALTH DEPT. OF MOLD IN JUNE 2007 AND MOLD WAS FOUND ON SEPT. 25 IN THE KITCHEN OF THE FACILITY. IN OCT. THE HEALTH DEPT. WAS INFORMED OF INFESTATION IN MANY CELL BLOCKS, ONE INSPECTED BY LT. CARTER, PARTIALLY MAINTENANCED BY TRUSTEES SUPERVISED BY McDONOUGH NEITHER BEING LICENSED OR REGISTERED INSPECTORS, BUT NEVER DID THE KANE COUNTY HEALTH DEPT.

OFFICIALLY INSPECT THE CELLBLOCKS IN ANY WAY.
THE KANE COUNTY JAIL AND THE KANE COUNTY HEALTH
DEPT. ARE TREATING KANE COUNTY DETAINEES WITH
DILIBERATE INDIFFERENCE, TOTALLY DISREGARDING
THE SAFETY AND LIVES OF EACH AND EVERY PRE-
TRIAL DETAINEE, RESTRICTING INDIVIDUALS TO AN
UNHEALTHY ENVIRONMENT, SUBJECTING US TO SYMTPMS
SUCH AS HEAD ACHEs, MAlFEVER, AND RESPIRATORY PROBLEMS
FOR ASTHMATICS, ALLOWING THE CONDITIONS TO VIOLATE
THE EIGHTH AND FOURTEENTH AMENDMENTS.

V. Relief:

State briefly exactly what you want the court to do for you. Make no legal arguments. Cite no cases or statutes.

PRAY THE COURT GRANTS RELIEF FOR PLAINTIFFS IN
THE SUM OF 250,000,000 (TWO HUNDRED FIFTY
MILLION DOLLARS).

VI. The plaintiff demands that the case be tried by a jury. YES NO

CERTIFICATION

By signing this Complaint, I certify that the facts stated in this Complaint are true to the best of my knowledge, information and belief. I understand that if this certification is not correct, I may be subject to sanctions by the Court.

Signed this 18 day of DEC, 20 07

W. T.

Wendell Thompson, Andre Jackson
(Signature of plaintiff or plaintiffs)

WENDELL THOMPSON, Andre Jackson
(Print name)

THOMPSON #30421, JACKSON #775546
(I.D. Number)

777 E. FABYAN PKWY.

GENEVA, IL 60134
(Address)